

<b>SCC eFile</b>	<b>2012 ANNUAL REPORT</b> <b>COMMONWEALTH OF VIRGINIA</b> <b>STATE CORPORATION COMMISSION</b>	<b>212536733</b>				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:  <b>PHL VARIABLE INSURANCE COMPANY</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  <b>CT CORPORATION SYSTEM</b>  <b>4701 COX RD STE 301</b>  <b>GLEN ALLEN, VA 23060-6802</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  <b>HENRICO COUNTY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:  <b>CT</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>9/30/2012</b></p> <p>SCC ID NO: <b>F0416018</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	1,000
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COMMON	1,000					
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: One American Row</p> <p style="margin-left: 40px;">CITY/ST/ZIP: Hartford, CT 06102</p>						
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS:      All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%; vertical-align: top;"> NAME: JAMES D. WEHR  TITLE: PRESIDENT  ADDRESS: ONE AMERICAN ROW  CITY/ST/ZIP/CO: HARTFORD, CT 06102 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 35%; text-align: center; vertical-align: top;"> <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: JAMES D. WEHR TITLE: PRESIDENT ADDRESS: ONE AMERICAN ROW CITY/ST/ZIP/CO: HARTFORD, CT 06102	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME:	WILLIAM HAYWARD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	31 TECH VALLEY DRIVE		
CITY/ST/ZIP/CO:	EAST GREENBUSH, NY 12061		
NAME:	JOHN V. LAGRASSE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EXECUTIVE VP		
ADDRESS:	ONE AMERICAN ROW		
CITY/ST/ZIP/CO:	HARTFORD, CT 06102		
NAME:	ROBERT J. LOMBARDI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SENIOR VP		
ADDRESS:	ONE AMERICAN ROW		
CITY/ST/ZIP/CO:	HARTFORD, CT 06102		
NAME:	KATHLEEN A. MCGAH	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP & ASST SECY		
ADDRESS:	ONE AMERICAN ROW		
CITY/ST/ZIP/CO:	HARTFORD, CT 06102		
NAME:	EDWARD J. NOVAK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECOND VP		
ADDRESS:	ONE AMERICAN ROW		
CITY/ST/ZIP/CO:	HARTFORD, CT 06102		
NAME:	GINA C. O'CONNELL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SENIOR VP		
ADDRESS:	ONE AMERICAN ROW		
CITY/ST/ZIP/CO:	HARTFORD, CT 06102		
NAME:	DANA PEDERSEN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECOND VP		
ADDRESS:	ONE AMERICAN ROW		
CITY/ST/ZIP/CO:	HARTFORD, CT 06102		
NAME:	DAVID R. PELLERIN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SENIOR VP		
ADDRESS:	ONE AMERICAN ROW		
CITY/ST/ZIP/CO:	HARTFORD, CT 06102		
NAME:	PETER A HOFMANN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR EVP/CFO/T		
ADDRESS:	ONE AMERICAN ROW		
CITY/ST/ZIP/CO:	HARTFORD, CT 06102		
NAME:	ABBEY N. MCDERMOTT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	DIR-TAX & AT		
ADDRESS:	ONE AMERICAN ROW		
CITY/ST/ZIP/CO:	HARTFORD, CT 06102		
NAME:	PHILIP K POLKINGHORN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SENIOR EVP		
ADDRESS:	ONE AMERICAN ROW		
CITY/ST/ZIP/CO:	HARTFORD, CT 06102		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHRISTOPHER M WILKOS EVP/CIO ONE AMERICAN ROW HARTFORD, CT 06102	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SUSAN L. GUZZELLI 2VP & ASST TREA ONE AMERICAN ROW HARTFORD, CT 06102	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN T. MULRAIN EVP & ASST SECY ONE AMERICAN ROW HARTFORD, CT 06102	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALETHA PRANKUS DIR, TREA OPS ONE AMERICAN ROW HARTFORD, CT 06102	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NEAL R. REGELS DIRECTOR ONE AMERICAN ROW HARTFORD, CT 06102	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	EDWARD W. CASSIDY DIRECTOR ONE AMERICAN ROW HARTFORD, CT 06102	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT P. MALLICK 2VP & CCO ONE AMERICAN ROW HARTFORD, CT 06102	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DOUGLAS C. MILLER SVP & CAO ONE AMERICAN ROW HARTFORD, CT 06102	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ JOHN H BEERS SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JOHN H BEERS, VP & SECRETARY PRINTED NAME AND CORPORATE TITLE	9/25/2012 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			